## SECURITY CLEARANCE REQUEST FORM 1300 MAIN

Please be advised that receipt of this form by JLL does not constitute security clearance on the desired date(s) or time(s). Access is contingent upon previously scheduled reservations. Please call to confirm that security clearance has been approved. The service elevator must be shared with janitorial staff on weekdays between the hours of 6:00 p.m. and 10:00 p.m. A Certificate of Insurance must be provided and verified for accuracy prior to access, if not currently on file with the Building Management Office.

Please submit this form to the Management Office via facsimile to 281-822-3670, or email to tracy.sanders@am.jll.com, ellen.pannell@am.jll.com, and terry.hanna@am.jll.com.

A minimum of 24 hours advance notice is required.

Today's Date:		
Company Name: Requestor's Name & Contact Number: Contractor Company Name:	 	
On-site Supervisor's Name:	 	
On-site Contact Number:		
Sub-Contractors:	 	

Dates & Tim	ies:		Areas Requ	equiring Access:			
Start	End	Start	End	Loading	Service		Room
Date	Date	Time	Time	Dock	Elevator	Floor(s)	Numbers

Work Description:

Management Use: Certificate of Insurance Verified & Compliant: \_\_\_\_\_

